

Department of Public Health and Social Services
Division of Environmental Health
Food Establishment Inspection Report

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INSPECTION	RSN	TYPE	GRADE	INSPECTION DATE	ESTABLISHMENT NAME
Regular		<input checked="" type="checkbox"/>	1	6/9/16	CHORE
Follow-up	<input checked="" type="checkbox"/>			TIME IN	TIME OUT
Complaint			RATING	10:00am	1:40pm
Investigation			A	SANITARY PERMIT NO.	LOCATION (Address)
Other:				15006 2915	LOT 2 BLK 17 AGANA, GUAM
ESTABLISHMENT TYPE			AREA	TELEPHONE	No. of Risk Factor/Intervention Violations
CATERING			8	ATTN: 524	18
					No. of Repeat Risk Factor/Intervention Violations
					3

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status			COS	R	PTS
Supervision					
1	IN	OUT			6
Person in charge present, demonstrates knowledge, and performance duties					
Employee Health					
2	IN	OUT			6
Management awareness; policy present					
3	IN	OUT			6
Proper use of reporting, restriction & exclusion					
Good Hygienic Practices					
4	IN	OUT	N/A	N/O	6
Proper eating, tasting, drinking, betelnut, or tobacco use					
5	IN	OUT	N/A	N/O	6
No discharge from eyes, nose, and mouth					
Preventing Contamination by Hands					
6	IN	OUT	N/A	N/O	6
Hands clean and properly washed					
7	IN	OUT	N/A	N/O	6
No bare hand contact with ready-to-eat foods or approved alternate method properly followed					
8	IN	OUT			6
Adequate handwashing facilities supplied & accessible					
Approved Source					
9	IN	OUT			6
Food obtained from approved source					
10	IN	OUT	N/A	N/O	6
Food received at proper temperature					
11	IN	OUT			6
Food in good condition, safe, and unadulterated					
12	IN	OUT	N/A	N/O	6
Required records available: shellstock tags, parasite destruction					
Protection from Contamination					
13	IN	OUT	N/A		6
Food separated and protected					
14	IN	OUT	N/A		6
Food contact surfaces: cleaned & sanitized					
15	IN	OUT			6
Proper disposition of returned, previously served, reconditioned, and unsafe food					

Compliance Status			COS	R	PTS
Potentially Hazardous Food (TCS Food)					
16	IN	OUT	N/A	N/O	6
Proper cooking time and temperatures					
17	IN	OUT	N/A	N/O	6
Proper reheating procedures for hot holding					
18	IN	OUT	N/A	N/O	6
Proper cooling time and temperature					
19	IN	OUT	N/A	N/O	6
Proper hot holding temperatures					
20	IN	OUT	N/A		6
Proper cold holding temperatures					
21	IN	OUT	N/A	N/O	6
Proper date marking and disposition					
Consumer Advisory					
22	IN	OUT	N/A		6
Consumer Advisory provided for raw or undercooked foods					
Highly Susceptible Populations					
23	IN	OUT	N/A		6
Pasteurized Foods used, prohibited foods not offered					
Chemical					
24	IN	OUT	N/A		6
Food additives: approved and properly used					
25	IN	OUT			6
Toxic substances properly identified, stored, used					
Conformance with Approved Procedures					
26	IN	OUT	N/A		6
Compliance with variance, specialized process, and HACCP plan					

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box: If numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status			COS	R	PTS
Safe Food and Water					
27					1
Pasteurized eggs used where required					
28					2
Water and ice from approved source					
29					1
Variance obtained for specialized processing methods					
Food Temperature Control					
30					1
Proper cooling methods used; adequate equipment for temperature control					
31					1
Plant food properly cooked for hot holding					
32					1
Approved thawing methods used					
33					1
Thermometer provided and accurate					
Food Identification					
34					1
Food properly labeled; original container					
Prevention of Food Contamination					
35					2
Insects, rodents, and animals not present					
36					1
Contamination prevented during food preparation, storage & display					
37					1
Personal cleanliness					
38					1
Wiping cloths: properly used and stored					
39					1
Washing fruits and vegetables					

Compliance Status			COS	R	PTS
Proper Use of Utensils					
40					1
In-use utensils: properly stored					
41					1
Utensils, equipment and linens: properly stored, dried, handled					
42					1
Single-use/single-service articles: properly stored, used					
43					1
Gloves used properly					
Utensils, Equipment and Vending					
44	<input checked="" type="checkbox"/>				1
Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used					
45					1
Warewashing facilities: installed, maintained, used; test strips					
46					1
Nonfood-contact surfaces clean					
Physical Facilities					
47					2
Hot & cold water available, adequate pressure					
48					2
Plumbing installed; proper backflow devices					
49					2
Sewage and wastewater properly disposed					
50					2
Toilet facilities: properly constructed, supplied, & cleaned					
51					2
Garbage/refuse properly disposed; facilities maintained					
52					1
Physical facilities installed, maintained, and clean					
53					1
Adequate ventilation and lighting; designated areas use					

I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.

Person in Charge (Print and Sign)	Date:
<i>[Signature]</i>	6/9/16
DEH Inspector (Print and Sign)	Follow-up (Circle one): YES NO Follow-up Date
<i>[Signature]</i>	

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ESTABLISHMENT NAME CHODE		LOCATION (Address) LOT 2 BLK 17 AGANA, GUAM
INSPECTION DATE 6/9/16	SANITARY PERMIT NO. 150002915	PERMIT HOLDER CHODE INCORPORATED

TEMPERATURE OBSERVATIONS

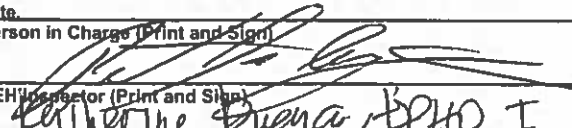
Item/Location	Temperature (° F)	Item/Location	Temperature (° F)

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	A FOLLOW-UP INSPECTION WAS CONDUCTED ON THIS DAY BASED ON INSPECTION CONDUCTED ON 5/27/16.	
	ALL PREVIOUS VIOLATIONS WERE CORRECTED.	
	#1, #2, #13, #20, #21, #33, #35, #37, #38, #49, & #52.	
	THE FOLLOWING NEW VIOLATION WAS OBSERVED:	
#44	CHILL UNIT STORING WHOLE VEGETABLES NOT MAINTAINING PROPER COLD HOLDING TEMPERATURES.	
	THE CHILL UNIT SHALL BE REPAIRED OR REPLACED IN ORDER TO MAINTAIN PRODUCT TEMPERATURE.	
	PG	
	BRIEFED PETER SAN AGUSTIN ON THE ABOVE.	
	PHOTOS WERE TAKEN	
	REMOVED "C" PLACARD NO. 00516	
	POSTED "A" PLACARD NO. 01100	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for hearing must be submitted to the Director before the indicated correction date.

Person in Charge (Print and Sign) 	Date: 6/9/16
DEH Inspector (Print and Sign) Katherine Brana, DEPHO I	Date: 6/9/16